State Employee Compensation Commission

Employee Request for Review

Personnel issues may be reviewed by the State Employee Compensation Commission per State Statute 9-2-1019(g). If an employee wishes to bring a personnel issue before the Commission the following form must be completed and submitted to the A&I Human Resource Division five (5) working days prior to the next scheduled Commission meeting to lori.eichheim@wyo.gov or by mail at 2001 Capitol Avenue, Cheyenne, WY 82002. Supporting documentation may also be submitted. Submission of an issue does not guarantee it will be placed on the agenda due to time constraints.

Employee Information

Date:			
Employee Name:	Agend	cy Name:	
E-Mail Address:		Phone/Extension:	
Request for Review Summary PLEASE PROVIDE A BRIEF SUMMARY OF YOUR REQUEST	FOR REVIEW AND SUPPORTIN	NG DOCUMENTATION, IF A	PPLICABLE.
Has this issue been presented to and address	ed by your agency?	Yes	No
Do you wish to present this personnel issue t	o the Commission?	Yes	No
FOR A&I HUMAN RESOURCE DIVISION USE ONLY			
DATE RECEIVED:	ASSIGNED TO:		
COMMENTS:			